

STATE OF MAINE

**IMMUNIZATION REQUIREMENTS
FOR SCHOOL CHILDREN**



**10-144 CODE OF MAINE RULES
CHAPTER 261
Department of Health and Human Services
Maine Center for Disease Control and Prevention**

AND

**05-071 CODE OF MAINE RULES
CHAPTER 126
Department of Education**

Last Amended: ~~May 10, 2018~~

**10-144 DEPARTMENT OF HEALTH AND HUMAN SERVICES
MAINE CENTER FOR DISEASE CONTROL AND PREVENTION**

Chapter 261: IMMUNIZATION REQUIREMENTS FOR SCHOOL CHILDREN

A joint rule with

05-071 DEPARTMENT OF EDUCATION (COMMISSIONER)

Chapter 126: IMMUNIZATION REQUIREMENTS FOR SCHOOL CHILDREN

SUMMARY: This rule is issued jointly by the Commissioner of Education and the Director of the Maine Center for Disease Control and Prevention, within the Department of Health and Human Services, to implement the provisions ~~of the School Immunization Law within~~ (20-A M.R.S. §§ 6352-~~6359~~6358). It prescribes the dosage for required immunizations for children entering and/or attending elementary and secondary schools and defines record-keeping and reporting requirements for school officials.

NOTICE

The Maine State Legislature has designated ~~proposed changes rules specifying relating to~~ diseases for which immunization is required ~~to be as~~ major substantive, ~~per~~ (20-A M.R.S. §6358(1)). ~~These changes add meningococcal meningitis to the diseases for which immunization is required, and are therefore major substantive.~~

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SECTION 1. DEFINITIONS

A. The definitions in this rule are those adopted in the School Immunization Law and include the following:

1. **Certificate of ~~H~~immunization** means a written statement from a physician, nurse or public health official who has administered an immunizing agent to a child, specifying that the required dosage was administered and the month, day and year in which it was administered.
2. **Children ~~E~~ntering ~~S~~school /~~School-Enterers~~** means any child who enters a school for the first time via pre-kindergarten or kindergarten enrollment, transfers from one school to another, or otherwise enrolls in a school for the first time.
3. **Disease** means diphtheria, varicella (chickenpox), measles, mumps, pertussis, poliomyelitis, rubella, meningococcal meningitis and tetanus.
4. **Enroll means to complete a formal procedure of adding a student to a roster as a pupil in a public school or school administrative unit, as appropriate, or private school.**
5. **Immunizing agent** means a vaccine, toxoid or other substance used to increase an individual's immunity to disease.
6. **Parent** means a child's parent, legal guardian, or custodian. A person ~~shall be~~ is regarded as a child's custodian if that person is an adult and has assumed legal charge and care of the child.
7. **Public health official** means the Director of the Maine Center for Disease Control and Prevention, or any designated employee or agent of the Department of Health and Human Services.
8. **School** means any public ~~and-or~~ private elementary ~~and-or~~ secondary ~~and-or~~ special education facility ~~which operates for children of compulsory school age providing instruction for any combination of pre-kindergarten through grade 12.~~
9. **Student ~~H~~health ~~R~~ecord** means documentation of health information and school nursing services provided to individual students including, but not limited to, immunizations, health screening, health assessment, and nursing care plans, ~~as needed.~~
10. **Superintendent** means the superintendent of a school administrative unit or his designee, or the chief administrative officer of a private school.

SECTION 2. IMMUNIZATION REQUIRED

A. Parental Responsibility

Except as otherwise prohibited by law, every parent ~~shall~~must cause to be administered to his child the required dosage of an immunizing agent against each of the following diseases.

- i. Diphtheria,
- ii. Measles
- iii. Meningococcal
- iv. Mumps

- v. Pertussis
- vi. Polio Tetanus
- vii. Rubella
- viii. Varicella

B. Superintendents' Responsibility

Unless exempt by law and this rule, nNo superintendent may permit any student to be enrolled in or to attend school without a certificate of immunization for each disease listed in this rule or other acceptable evidence of required immunization or immunity against each disease.

SECTION 3. EXCEPTIONS

A. Enrollment or Attendance Without Immunization Information

A child who does not provide evidence of immunization or immunity against a disease listed in this rule is not permitted to enroll in or attend school unless one or more of ~~A child who does not meet the immunization/immunity requirement may be enrolled in school under~~ the following circumstances apply:

1. Written Assurance from Parent of Private Effort to Immunize Child: The parent provides the school with a written assurance that the child will be immunized by private effort within 90~~ninety~~ days of enrolling-enrollment~~(officially registering) in school or of the child first attending-attendance in school classes~~, whichever date is the earliest, in accordance with 20-A MRS § 6355(1).

The granting of this 90-day period is a one-time provision. ~~A child transferring from one school to another within the state may not be granted a second 90-day period, however, a period of 21 calendar days may be granted to allow for the transfer of health records from one school to another. If, after 90 days have passed, the parent fails to provide the required evidence of immunization or immunity against each of the diseases listed in this rule, then the superintendent must exclude the student from school and may permit the student's return upon receipt of evidence of the required immunizations, immunity or exemption under law.~~
2. Written Consent to Immunize Child: The parent grants written consent for the child's immunization by a public health officer, physician, nurse or other authorized person in their employ, or acting as an agent of the school, where such immunization programs are in effect.
3. Medical exemption in accordance with 20-A MRS § 6355(2). ~~The parent (or child) presents to the school each year a physician's written statement that immunization against one or more of the diseases may be medically inadvisable.~~
4. Individualized Education Plan: ~~The parent states in writing each year an opposition to immunization because of a sincere religious belief or for philosophical reasons. A~~In accordance with 20-A MRS § 6355(4), a student covered by an individualized education plan on September 1, 2021 who elected a philosophical or religious exemption from immunization requirements on or before September 1, 2021 pursuant to the law in effect prior to that date, may continue to attend school under that student's existing exemption as long as:

- a. The parent or guardian of the student provides a statement from a licensed physician, nurse practitioner or physician assistant that the physician, nurse practitioner or physician assistant has consulted with that parent or guardian and has made that parent or guardian aware of the risks and benefits associated with the choice to immunize; or
 - b. If the student is 18 years of age or older, the student provides a statement from a licensed physician, nurse practitioner or physician assistant that the physician, nurse practitioner or physician assistant has consulted with that student and has made that student aware of the risks and benefits associated with the choice to immunize.
 - c. If a student has an immunization exemption in accordance with this section, the student will be able to maintain that exemption after dismissal from special education services and will be considered exempt until the child is no longer eligible for free, appropriate public education (FAPE).
5. The student may be enrolled in a distance education program offered by a school, if the student does not physically attend any classes or programs at the school or a school facility.

~~B. Medical Exemptions~~

~~The following are medical contraindications for which medical exemptions may be certified by a physician for immunizations required by 20 A.M.R.S. §§ 6352-6359:~~

~~**Pertussis vaccine:** 1) fever greater than or equal to 40.5 C (105 F); collapse or shock-like state (hypotonic-hyporesponsive episode), or persistent, inconsolable crying lasting three or more hours within 48 hours of receiving a prior dose of the pertussis vaccine; 2) seizures occurring within three days of receiving a prior dose of pertussis vaccine; 3) encephalopathy within seven days of administration of a previous dose of pertussis vaccine; or 4) anaphylactic reaction to pertussis vaccine or a vaccine constituent.~~

~~**Diphtheria or tetanus toxoids:** 1) anaphylactic reaction to diphtheria or tetanus toxoids or a toxoid constituent.~~

~~**Measles or mumps vaccine:** 1) pregnancy; 2) known altered immunodeficiency (hematologic and solid tumors; congenital immunodeficiency; and long-term immunosuppressive therapy); 3) anaphylactic reactions to egg ingestion or to neomycin; 4) anaphylactic reaction to measles or mumps vaccine or a vaccine constituent.~~

~~**Rubella vaccine:** 1) pregnancy; 2) known altered immunodeficiency (hematologic and solid tumors; congenital immunodeficiency; and long-term immunosuppressive therapy); 3) anaphylactic reactions to neomycin; 4) anaphylactic reaction to rubella vaccine or a vaccine constituent.~~

~~**Live polio vaccine:** 1) known altered immunodeficiency (hematologic and solid tumors; congenital immunodeficiency; long-term immunosuppressive therapy); other immunodeficient condition; 2) immunodeficient household contact; 3) anaphylactic reaction to polio vaccine or a vaccine constituent.~~

or

Inactivated polio vaccine: 1) anaphylactic reactions to neomycin or streptomycin;
2) anaphylactic reaction to polio vaccine or a vaccine constituent.

Varicella: 1) pregnancy; 2) immunosuppression; 3) anaphylactic reaction to a vaccine component; 4) recent recipient of antibody-containing blood product.

Quadrivalent meningococcal conjugate vaccine: 1) pregnancy; or 2) anaphylactic reaction to meningococcal vaccine or a vaccine constituent.

SECTION 4. CERTIFICATE OF IMMUNIZATION; EVIDENCE OF IMMUNITY

A. Certificate of Immunization

To demonstrate adequate immunization against each disease, a child ~~shall~~must present the school with a ~~C~~ertificate of ~~I~~mmunization from a licensed physician, nurse practitioner or physician assistant ~~physician, nurse~~ or public health official who has administered the immunizing agent(s) to the child. The certificate ~~shall~~must specify the immunizing agent, the dosage administered and the date(s) on which it was administered.

B. Proof of Immunity

In the absence of a certificate of immunization, ~~t~~The child ~~shall~~must present the school with laboratory evidence demonstrating immunity or reliable documented history provided by a physician or other primary care provider.

SECTION 5. IMMUNIZATION DOSAGE

The following schedule ~~is the schedule of~~shows the minimum requirements ~~s~~ for immunizing agents administered to children entering-enrolling in or attending school.

Diphtheria/Tetanus/Pertussis (DTP): ~~Five doses of any DTP containing vaccine or DT (pediatric). If the fourth dose was administered on or after the fourth birthday, then only four doses are required. The first dose must be administered at least six weeks after birth. The first three doses must be given at least four weeks apart and the fourth dose must be given at least six months after the third dose.~~

Td (Adult) ~~may be substituted for DTP containing vaccine for non-immunized or incompletely immunized students who have reached the seventh birthday. If administering Td (Adult) vaccine, only three doses are required, with the first two doses given at least four weeks apart and the third dose given six months after the second. The first dose given after age seven should be a Tdap vaccine.~~

Tetanus/Diphtheria/Pertussis (Tdap): ~~Effective for the start of school year 2017, one dose of Tdap vaccine is required for children entering 7th grade.~~

A. Diphtheria/Tetanus/Pertussis (DPT/DTaP/Tdap/ Td):

1. For pre-kindergarten students only, four doses of DPT/DTaP are required. The third and fourth dose must be separated by at least six months.
2. For students ages six years old and younger in kindergarten or grades above, a total of five doses of DPT/DTaP are required, except that, if the fourth dose was administered on or after the child's fourth birthday, then only four doses are required.

3. For students seven years of age and older, a minimum of three doses of DPT/DTaP with the last dose administered on or after the child's fourth birthday is required. A student who did not complete their primary DTP/DTaP immunization series or who has an unknown vaccine history, requires a single dose of Tdap followed by either Tdap or Td until three doses have been achieved.
4. In addition to receiving the required doses for DPT/DTaP, one dose of Tdap vaccine is required for students entering grade 7. Any valid dose of Tdap after age seven satisfies the requirement for 7th grade entry.

B. Measles/Mumps/Rubella (MMR): All students in grades kindergarten ~~–through~~ 12 ~~shall~~must be ~~have been~~ immunized against measles, mumps, and rubella with two doses of MMR vaccine, provided the first dose is administered no sooner than 12 months of age and at least four weeks separate the two doses. For pre-kindergarten students only, one dose of MMR vaccine is required.

C. Poliomyelitis: ~~Four doses of oral polio vaccine (OPV). The first dose of OPV must be administered at least six weeks after birth, with subsequent doses given at least four weeks apart. The fourth dose is not needed if the third dose is given on or after the 4th birthday.~~

~~or~~

~~**Four doses of inactivated polio vaccine (IPV):** The first dose of IPV must be administered at least six weeks after birth, with subsequent doses given at least four weeks apart. The fourth dose is not needed if the third dose is given on or after the 4th birthday. An all-IPV schedule is the preferred schedule for routine polio vaccination, including children who began the series with OPV. If a child receives both types of vaccine, four doses of any combination of IPV or OPV by four through six years of age is considered a complete polio vaccination series. For students in grades kindergarten – 12, four doses of inactivated polio vaccine (IPV) or oral polio vaccine (OPV) or combination of both are required. The first dose must be administered at least six weeks after birth, with subsequent doses given at least four weeks apart. The fourth dose is not needed if the third dose is given on or after the fourth birthday. For students in pre-kindergarten only, three doses of IPV or OPV or a combination of both are required. The first dose must be administered at least six weeks after birth, with subsequent doses given at least four weeks apart.~~

D. Varicella: One dose of varicella vaccine is required for children in grades kindergarten through 12.

~~Any such immunizing agent must meet the standards for such biological products as are approved by the United States Public Health Service.~~

E. Quadrivalent meningococcal conjugate vaccine (MCV4): Effective for the start of school year 2018, one dose of MCV4 is required for children entering 7th grade seven. Any child entering 12th grade 12 is required to have received two doses of MCV4. The first dose ~~shall~~must have been received on or after the ~~11th~~eleventh birthday, and the second dose ~~shall~~must have been received on or after the ~~16th~~sixteenth birthday, at least eight weeks after the first dose. However, if the first dose is administered when the child is ~~16~~sixteen years of age or older, only one dose is required.

F. For children who have received vaccinations on a schedule that is not in accordance with this rule, the child, parent, and/or superintendent may consult with the Department of Health and Human Services Maine Immunization Program to determine an appropriate catch-up schedule that will meet immunity requirements for this rule.

SECTION 6. EXCLUSION FROM SCHOOL

A. Exclusion by Order of Public Health Official

A child not immunized or immune from a disease ~~shall~~must be excluded from school and school activities when ~~in the opinion of~~ a public health official determines that the child's continued presence in school poses a clear danger to the health of others. The superintendent ~~shall~~must exclude the child from school and school activities during the period of danger, or until the child is immunized. If another child attending the same school is infected with, or shows symptoms of, the same disease during the period of danger, the exclusion period for the student who is not immunized or immune must be extended for another full term of the incubation period set forth below.

The following periods are defined as ~~the a~~ "period of danger":²²

1. **Measles:** 15 days (one incubation period) from the onset of symptoms of the last identified case in the school.
2. **Rubella:** 23 days (one incubation period) from the onset of symptoms of the last identified case in the school.
3. **Mumps:** 18 days (one incubation period) from the onset of symptoms of the last identified case in the school.
4. **Varicella:** 21 days (one incubation period) from the onset of symptoms of the last identified case in the school.

In accordance with 20-A MRS § 6356(1), ~~For the superintendent must make arrangements to meet the educational needs of any child so excluded from school for more than ten days. the superintendent must make arrangements to meet the child's educational needs.~~ This section does not require the provision of off-site classes or tutoring.

B. Exclusion by Order of Superintendent

In addition to children who do not meet the immunization requirements of this rule, Aa superintendent ~~shall~~may also exclude from schools and school activities any enrolled child ~~on account of if the child is with a suspected public health threat by reason of a~~ or communicable disease of the skin, mouth or eyes, in accordance with 20-A M-R-S- §6301. The superintendent ~~shall~~must also exclude from public school any enrolled child or employee who has contracted or has been exposed to a communicable disease as directed by a public health official, ~~or as recommended by a school physician.~~

C. ~~Requirement for Educational Arrangements~~

~~For any child so excluded from school for more than ten days, the superintendent must make arrangements to meet his educational needs.~~

~~This section does not require the provision of off-site classes or tutoring. Instead, the child's educational needs may be met by making arrangements for the delivery of school assignments, correction of papers, and similar activities which can be accomplished at home. Any child who is~~

~~unable to take examinations during this period shall be afforded the opportunity to make up the examinations, similar to arrangements made for children who have other excused absences.~~

C. Exclusion by Order of Department of Health and Human Services

The Department of Health and Human Services is authorized to order removal of an enrolled child, in accordance with 22 MRS § 806 and the Maine Control of Notifiable Diseases and Conditions Rule at 10-144 CMR ch 258, Section 9 (E)(3)(b), in the event of an actual or threatened outbreak of a communicable disease or other public health threat. After a determination is made in accordance with 22 MRS § 806(2) that a removed enrolled child is permitted to return, and the public health threat no longer exists, the Department of Health and Human Services will notify the superintendent of that determination.

SECTION 7. RECORDS AND RECORD-KEEPING

A. Designated Record Keeping

1. The school nurse (or head school nurse) in each school unit or private school ~~shall~~is responsible for the maintenance of immunization records. If no school nurse has been employed, the superintendent ~~shall~~must designate another responsible person.
2. If immunization and ~~school~~student health records are physically maintained in individual school buildings, a designated person in each building ~~shall~~must have responsibility for supervision of the records.

B. Individual Health Records

1. Each school/unit ~~shall~~is required to adopt a uniform permanent student health record for maintaining information regarding the health status of each child as defined under Section 1.
2. The immunization status of each student regarding each disease listed in this rule shall~~must~~ be noted on the child's individual student health record. These records are confidential, except that state and local health personnel ~~shall have~~may access ~~to them~~ to ensure compliance with immunization and documentation requirements of this rule, or as it relates to in connection with ensuring compliance with these regulations or an emergency, as provided by the *United States Family Educational Right and Privacy Act of 1974*, 20 U.S.C. §1232g(b)(1) and the regulations adopted under that act.
3. Where an exemption has been granted as allowed in law and this rule ~~for sincere religious or philosophical reasons~~, the ~~parent's~~ written request for exemption must be on file with the school health record ~~and updated annually~~.
4. Whenever a superintendent permits a non-immunized student a 90-day exemption based on a written assurance in accordance with this rule, the school official responsible for maintaining student health records must keep a record of such exemptions. Each such record must include the date of acceptance and date that the allowance expires.

C. List of Non-Immunized Children

1. The ~~designated record keepers~~ school official responsible for maintaining student health records in each school unit or school ~~shall~~must keep a listing of the names of all children within the school unit or school who are not currently immunized against each disease. This list ~~shall~~must include the names of all students with authorized exemptions from immunizations, including time-limited exemptions permitted in accordance with Section 3(A) of this rule and 20-A MRS §6355(1), as well as any who might not be in compliance with the law. The purpose of the list is to provide an efficient ~~referral to~~means of identifying non-immunized children in ~~time~~the event of a disease outbreaks.
2. A child who has not received all the required doses of vaccine ~~shall~~must not be permitted to attend school beyond the first day, ~~without a statement which indicates the child will be immunized by private effort within ninety days (or the parent grants written consent for the child's immunization by a public health officer, physician, nurse or other authorized person acting as an agent of the school), unless the parent is claiming an exemption due to a sincere religious belief or for philosophical reasons, or the school is presented with a medical exemption signed by the child's physician, unless the criteria outlined in Section 3 of this rule is satisfied. When the child is permitted to return, the list must be updated accordingly.~~

SECTION 8. REQUIRED REPORTS

A. Superintendent's Responsibility

The superintendent is responsible for submitting a summary report regarding the immunization status of students within his or her jurisdiction by December 15 of each year, on a prescribed form, to the ~~Director of the Maine Center for Disease Control and Prevention~~Department of Health and Human Services and the ~~Commissioner~~Department of Education.

B. Summary Report

1. The summary report will include the following information at a minimum: specific information identifying the school, the superintendent; the total student enrollment, the number of new students identified by vaccine type, as either immunized, exempt or out of compliance, and the number of students who are previously enrolled and unimmunized. The report must denote the students enrolled pursuant to a written assurance exemption. The summary report will be constructed so as to reflect meaningful data by grade ~~groupings but with kindergarten treated separately.~~ Each~~The school superintendent must certify each~~ report as ~~shall be signed by the school superintendent as a certification that the information is~~ accurate and complete.
2. Additional requirements regarding the immunization of children or employees of any school ~~may be~~ adopted by ordinance of the municipality, regulation of school board policy, or policy of a private school's governing board must be included in the summary report.
3. The ~~Maine Center for Disease Control and Prevention~~Department of Health and Human Services will, from time to time, select a small sample of student health records for the purpose of comparing reported results against the criteria delineated in ~~this~~these rules. The results of this sample survey will be shared with school superintendents for the purpose of identifying problem areas that may be occurring in the completion of their school health records. Individual students will not be identified by name.

STATUTORY AUTHORITY: 20-A M-R-S: §§ 635~~2-635~~8(1)9; 22 MRS § 806

EFFECTIVE DATE:

May 29, 1985

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AMENDED:

July 14, 1996 *(APA Office Note: the Education Department version, 05-071 Ch. 126, does not appear to have been amended since May 29, 1985.)*

NON-SUBSTANTIVE CORRECTIONS:

January 15, 2002 - minor formatting, history notes

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May 26, 2002

December 21, 2016 – filing 2016-228 *(a joint rule with the Department of Education, Ch. 126)*

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2020 – filing 2020- *(Routine Technical Rule, jointly with the Department of Education, 05-071 CMR Ch. 126)*